I. County Information

2011 REPORT TO THE LEGISLATURE COUNTY INFORMATION REPORT

AUTHORITY: 1986 PA 32, as amended; COMPLIANCE: Voluntary; PENALTY: No funding

Information should be reported for the period covering the 2010 calendar year, including data for all primary PSAPs in the county.

1. County Name	2. County 9-1-1 Coordin	ator	
3. Address			
4. Phone Number (Include Area Code)	5. E-Mail Address		
6. If the reporting period is NOT the calendar year, disclose the timeline	below.		
II. 2010 9-1-1 Operating Budget			
Item		Total	Annually Audited?
7. 2010 Total <u>State</u> 9-1-1 Surcharge (All Device) Receipts			Yes No
8. 2010 Total <u>Local</u> 9-1-1 Surcharge (All Device) Receipts		Yes No	
9. 2010 Total 9-1-1 Millage Receipts			Yes No
10. 2010 Total General Fund Monies			Yes No
11. 2010 Total Other Receipts – (Please indicate source[s], attach separately any dispatcher training fund monies that your county receipts.		Yes No	
12. 2010 Total 9-1-1 Operating Budget (Total for All PSAPs in county)			Yes No
III. 2010 Expenditures			
Item		Total	
Item		Total	-
13. 2010 Total Other Allowable Expenditures from 9-1-1 Surcharge Fun	nds	Total	
		Tota	
13. 2010 Total Other Allowable Expenditures from 9-1-1 Surcharge Fur	explanation [required])	Tota	
13. 2010 Total Other Allowable Expenditures from 9-1-1 Surcharge Fur 14. 2010 Total Unexpended 9-1-1 Surcharge Funds Receipts (Attach 6 15. 2010 Total Carryover of Unexpended 9-1-1 Surcharge Funds Prior	explanation [required])	Tota	
 13. 2010 Total Other Allowable Expenditures from 9-1-1 Surcharge Fur 14. 2010 Total Unexpended 9-1-1 Surcharge Funds Receipts (Attach et al. 2010 Total Carryover of Unexpended 9-1-1 Surcharge Funds Prior (Attach explanation) 16. 2010 Total Other County 9-1-1 expenses incurred by a non-PSAP 	explanation [required]) to 2009 receipt	Tota	
 13. 2010 Total Other Allowable Expenditures from 9-1-1 Surcharge Fur 14. 2010 Total Unexpended 9-1-1 Surcharge Funds Receipts (Attach et al. 2010 Total Carryover of Unexpended 9-1-1 Surcharge Funds Prior (Attach explanation) 	explanation [required]) to 2009 receipt	Tota	
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NOTE: The following 9-1-1 efficiencies grid in Section V below is voluntary.

V. PSAP Data

PSAP Name	# of Incoming 9-1-1 Calls	# of Incoming Non-9-1-1 Calls	* Communities Served	Population Served by PSAP	Annual \$ Funding Source General Fund	Annual \$ Funding Source Local 9-1-1 Surcharge	Annual \$ Funding Source State 9-1-1 Surcharge	**Annual \$ Funding Source Other

^{* &}quot;Communities Served" is defined by cities, villages, and townships. Using this definition, please indicate the number of communities served by each PSAPs.

VI. Authorization and Certification

Name of Person Completing Form	Signature	Date	
Return To: Michigan State Police State 9-1-1 Administrative Section P.O. Box 30634 Lansing, MI 48909-0634 Attention: Janet Hengesbach	This form must be returned by noon on Monday, May 16, 2011. This form can be accessed at www.michigan.gov/snc . Facsimile or handwritten forms WILL NOT be accepted.		

^{**} This includes federal grants, millages, other fees, etc.